File with: lowa Ethics and Campaign Disclosure Board 510 E. 12<sup>th</sup>, Sta. 1A Des Moines, Iowa 50319



2009 JUL 14 PM FOR INSTRUCTIONS SEE BACK OF FORM

(FAX)515 265 5665

Fax: 515-281-4073	DISCLOSURE SU				14 PM 4: 08
COMMITTEE NAME (Must be	e same as on Statement of Organizati	on)			•
Laborers Political Action C		•		FORM	
(1) Statewide/Legislative/Judge (4) County Central Committee (5)	of committee you are reporting for: 2 Standing for Retention Candidate (2)Stat 5)County Candidate (6)City Candidate ( ty PAC (9)City PAC (10)School Board	e PAC ( 3 )State Party 7 )School Board or Other Politica		DR-2 (Rev. 07/2007 For Office Use Comm. #	DISCLOSURE REPORT
CANDIDATE COMMITTEES Candidate Name		Political Party (if applicable)		Logged In	
Office Sought		District (if Senate or House)			
BURGA SIGNATURE OF PERSON FILE		5/5 24.5 2.558 TELEPHONE		07/14/	09 SIGNED
AM FILING A Jan 1, 2009-	June 30,2009	REPORT FOR (1) ELECTION	/(2)NO	N-ELECTION	EAR.
	O REPORT DATED	Indicate by	# [4_]		
	ENT OF CASH ON HAND sing of the reporting period. (Total of a	all funds held by the			
committee. This amo	ount MUST be the same as the cash of eriod or must be zero if this is first rep	n hand at the end		s <u>5,753.2</u> 6	5
ADD TOTAL MONEY	TAKEN IN THIS PERIOD				
Schedule A: Cash C	ontributions total (Attach Schedule A)	(*also see in-kind below)		6,150.00	)
Schedule F: Loans F	Received total (Attach Schedule F)	·	*********		
Schedule H: Total Sa	ales of Campaign Property (Attach Sc	hodule H)		<del></del>	,
<u>(\$chedule F</u>	l applies to Candidates' Committee	<u>s Only)</u> SUB-TOTAL		s 11,403.2	26
SUBTRACT TOTAL	MONEY SPENT THIS PERIOD				, , , , , , , , , , , , , , , , , , , ,
	itures total (Attach Schodulo B) (**alsi epayments total (Attach Schedule F)	•		<u></u>	
	this reporting period (if final report ba			s 11,403.2	26
*UNPAID BILLS (From School	dule D - Attach Schedule D)		5	\$	
	From Schedule E - Attach Schedule E			·	
·	om Schedule F - Attach Schedule F)	•			
CONSULTANT BREAKDOWN				YES V	_ NO
CANDIDATE COMMITTEES C	•		•		
	PERTY (From Schedule H - Attach Sc	hedule H)	3	\$	
	ilt a reconciled campaign account ban		h year.		

## CONTRIBUTIONS -- MONEY TAKEN IN (Including candidate's personal funds) COMMITTEE NAME (Must be same as on Statement of Organization) Laborers Political Action Committee

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of Information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
1/07/09	ID# CK#	Uniternized Contribution		\$25	INCOME
1/07/09	ID# CK#	Unitermized Contribution		1000.	
2/05/09	ID# CK#	Unitermized Contribution		25.	
2/05/09	1D#	Unitermized Contribution		1000.	
3/05/09	ID# CK#	Unitermized Contribution		25.	
3/05/09	ID# CK#	Unitermized Contribution		1000.	
4/02/09	ID# CK#	Unitermized Contribution		25.	
4/02/09	ID# CK#	Uniternized Contribution		1000.	
5/06/09	ID# CK#	Uniterrized Contribution		25.	
5/06/09	ID# CK#	Uniternized Contribution		1000,	
			SUB-TOTAL	\$ 5125	
B' I .		TOTAL (if lost page	e of this schedule)	\$ 0	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 2 (for Schedule A)

## CONTRIBUTIONS -- MONEY TAKEN IN (including candidate's personal funds) COMMITTEE NAME (Must be same as on Statement of Organization) Laborers Political Action Committee

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
	10#	1124			INCOME
6/03/09	CK#	Uniternized Contribution	1	\$25	
	ID#				
6/03/09	CK#	Unitemized Contribution		1000.	
	ID#				
	CK#				
	ID#				
	CK#				
-	ID#				
	CK#	•			
	ID#				
	CK#				
1D#	1D#		-		
	CK#				
1	ID#		-		
	CK#				
11	ID#				
	CK#				
	ID#		<del>                                     </del>		
	CK#				
			SUB-TOTAL	\$ 1025.00	***************************************
		TOTAL (If last page	of this schedulo)		
Disclosure law req	juires candidate committee	s to disclose the relationship of any relative making a contribution		\$ 6150.00	

"Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 2 (for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

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150 married 184		

## EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

B	MONETARY
(Rev. 07/03)	EXPENDITURES
	CK THIS BOX IF NDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization) Laborers Political Action Committee CANDIDATE NAME AND ADDRESS TO WHOM PURPOSE DATE ID NUMBER TAUDOMA EXPENDITURE (DESCRIBE TRANSACTION) (if applicable) EXPENDED EXPENDED (Disbursement) WAS MADE (MM/DD/YR) AND PAC CHECK NUMBER ID# CK# \$ ID# CK# ID# CK# ID# ÇK# ID# CK# ID# CK# ID# CK# ID# CK#

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entitles providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

Page	1	of 1	
		- 01	

SUB-TOTAL

TOTAL (If last page of this schodule)